

TO: Clerk of This Honorable Court,

7-3-17

Enclosed are the forms for the U.S. Marshals to serve defendants involved in said case per the order. I would also like to request that if there are any extra copies that need to be made could the clerk please oblige and get them to the proper parties. Also included is a copy of the signed form to file *In Forma Pauperis* which I would like to use to present to the court for my motion for appointment of counsel, due to the fact that from this point on in the proceedings I don't know how to handle the process and would regret my case being dismissed due to my lack of knowledge on how to litigate in civil law. I've also previously sent in copies of rejection letters from several law firms in regards to taking my case which should also still be on file, so I pray that this Honorable court grants my request for appointment of counsel in this case.

**FILED**

JUL 05 2017

THOMAS G. BRUTON  
CLERK, U.S. DISTRICT COURT

Respectfully

Dontee L. Brown

UNITED STATES DISTRICT COURT FOR THE  
NORTHERN DISTRICT OF ILLINOIS

IN FORMA PAUPERIS APPLICATION  
AND  
FINANCIAL AFFIDAVIT

Dontee L. Brown  
Plaintiff

v.

Sheriff Kelly C. Wilhelm, et al.  
Defendant(s)

Case Number: 11c C 50337

Judge: Phillip C. Reinhard

**Instructions:** Please answer every question. Do not leave any blanks. If the answer is "none" or "not applicable (N/A)," write that response. Wherever a box is included, place an X in whichever box applies. If you need more space to answer a question or to explain your answer, attach an additional page that refers to each such question by number and provide the additional information. Please print or type your answers.

**Application:** I, Dontee L. Brown, declare that I am the ☒ plaintiff ☐ petitioner ☐ movant (other \_\_\_\_\_) in the above-entitled case. This affidavit constitutes my application ☐ to proceed without full prepayment of fees, or ☒ in support of my motion for appointment of counsel, or ☐ both. I declare that I am unable to pay the costs of these proceedings, and I believe that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of my application, I answer the following questions under penalty of perjury.

1. Are you currently incarcerated?

☐ Yes

☐ No

I.D. #: 208666

Name of prison or jail: Whiteside County Jail

Do you receive any payment from the institution?

☐ Yes

☒ No

Monthly amount: \_\_\_\_\_

2. Are you currently employed?

☐ Yes

☒ No

a. If the answer is "yes," state your:

Monthly salary or wages: \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

b. If the answer is "no," state your:

Beginning and ending dates of last employment: \_\_\_\_\_

Last monthly salary or wages: \_\_\_\_\_

Name and address of last employer: \_\_\_\_\_

3. Are you married?

If the answer is "yes," is your spouse currently employed?

☐ Yes

☒ No

Spouse's *monthly* salary or wages: \_\_\_\_\_

☐ Yes

☐ No

Name and address of spouse's employer: \_\_\_\_\_

4. In addition to your income stated above in response to Question 2 (which you should not repeat here), *have you or anyone else living at the same residence* received more than \$200 in the past twelve months from any of the following sources? Mark an X next to "Yes" or "No" in each of the categories a. through g, check all boxes that apply in each category, and fill in the twelve-month total in each category.

a. ☐ Salary or ☐ wages

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

b. ☐ Business, ☐ profession or ☐ other self-employment

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

c. ☐ Rental income, ☐ interest or ☐ dividends

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

d. ☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurance, ☐ disability, ☐ workers' compensation, ☐ alimony or maintenance or ☐ child support

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

e. ☐ Gifts or ☐ inheritances

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

f. ☐ Unemployment, ☐ welfare or ☐ any other public assistance

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

g. ☐ Any other sources (describe source: \_\_\_\_\_)

Amount: \_\_\_\_\_

Received by: \_\_\_\_\_

☐ Yes

☒ No

5. Do you or anyone else living at the same residence have more than \$200 in cash or checking or savings accounts?

Total amount: \_\_\_\_\_

☐ Yes

☒ No

In whose name held: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

6. Do you or anyone else living at the same residence own any stocks, bonds, securities or other financial instruments?

Property: \_\_\_\_\_

Current value: \_\_\_\_\_

☐ Yes

☒ No

In whose name held: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

7. Do you or anyone else living at the same residence own any real estate (with or without a mortgage)? Real estate includes, among other things, a house, apartment, condominium, cooperative, two-flat, etc. ☐ Yes ☒ No

Type of property and address: \_\_\_\_\_  
Current value: \_\_\_\_\_ Equity: \_\_\_\_\_ (Equity is the difference between what the property is worth and the amount you owe on it.)  
In whose name held: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Amount of monthly mortgage or loan payments: \_\_\_\_\_  
Name of person making payments: \_\_\_\_\_

8. Do you or anyone else living at the same residence own any automobiles with a current market value of more than \$1000? ☐ Yes ☒ No

Year, make and model: \_\_\_\_\_  
Current value: \_\_\_\_\_ Equity: \_\_\_\_\_ (Equity is the difference between what the automobile is worth and the amount you owe on it.)  
Amount of monthly loan payments: \_\_\_\_\_  
In whose name held: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Name of person making payments: \_\_\_\_\_

9. Do you or anyone else living at the same residence own any boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? ☐ Yes ☒ No

Property: \_\_\_\_\_  
Current value: \_\_\_\_\_ Equity: \_\_\_\_\_ (Equity is the difference between what the property is worth and the amount you owe on it.)  
Amount of monthly loan payments: \_\_\_\_\_  
In whose name held: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Name of person making payments: \_\_\_\_\_

10. List the persons *who live with you* who are dependent on you for support. State your relationship to each person and state whether you are entirely responsible for the person's support or the specific monthly amount you contribute to his or her support. If none, check here: ☐ None.

\_\_\_\_\_  
\_\_\_\_\_

11. List the persons *who do not live with you* who are dependent on you for support. State your relationship to each person and state how much you contribute monthly to his or her support. If none, check here: ☐ None.

\_\_\_\_\_  
\_\_\_\_\_

I declare under penalty of perjury that the above information is true and correct. I understand that 28 U.S.C. § 1915(e)(2)(A) states that the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: 11/04/16



Signature of Applicant

Donte Brown  
(Print Name)

**NOTICE TO PRISONERS:** In addition to the Certificate below, a prisoner must also attach a print-out from the institution(s) where he or she has been in custody during the last six months showing all receipts, expenditures and balances in the prisoner's prison or jail trust fund accounts during that period. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account – prepared by each institution where you have been in custody during that six-month period. As already stated, you must also have the Certificate below completed by an authorized officer at each institution.

**CERTIFICATE**

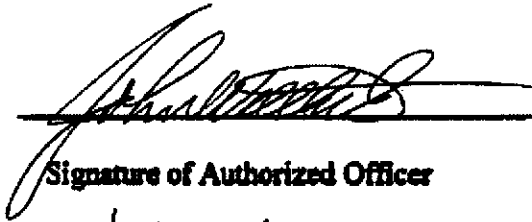
(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I certify that the applicant named herein, Donte Brown, I.D.# 20866, has the sum of \$ 0.00 on account to his/her credit at (name of institution) Whiteside Co Jail. I further certify that the applicant has the following securities to his/her credit: Ø. I further certify that during the past six months the applicant's average monthly deposit was \$ 36.00. (Add all deposits from all sources and then divide by number of months).

11/04/16

Date



Signature of Authorized Officer

John Wilk  
(Print Name)